

## Application Data Sheet

### Application Information

Application number:: Unassigned

Filing Date:: \_\_\_/\_\_\_/\_\_\_

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: METHOD OF MANUFACTURING AN OPTICAL  
CORE

Attorney Docket Number:: A6123/T43700

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 20

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Tunisia  
Status:: Full Capacity  
Given Name:: Hichem  
Middle Name::  
Family Name:: M'Saad  
Name Suffix::  
City of Residence:: Santa Clara  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 3500 Granada Avenue, #364  
City of Mailing Address:: Santa Clara  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95051

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: PR China  
Status:: Full Capacity  
Given Name:: Anchuan  
Middle Name::  
Family Name:: Wang  
Name Suffix::  
City of Residence:: Fremont  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 46728 Crawford Street, Apt. #2  
City of Mailing Address:: Fremont  
State or Province of mailing address:: CA  
Country of mailing address:: US

Postal or Zip Code of mailing address:: 94539

### **Correspondence Information**

#### **Correspondence Customer Number::**

Name Line One::	Patent Counsel, M/S 2061
Name Line Two::	APPLIED MATERIALS, INC.
Address Line One::	Legal Affairs Department
Address Line Two::	P.O. Box 450A
City::	Santa Clara
State or Province::	CA
Postal or Zip Code::	95052
Telephone::	(650) 326-2400
Fax::	(415) 576-0300

### **Representative Information**

Registration Number One::	25,610
Registration Number Two::	37,771
Registration Number Three::	33,217
Registration Number Four::	25,226
Registration Number Five::	37,165
Registration Number Six::	35,412
Registration Number Seven::	25,436
Registration Number Eight::	44,713
Registration Number Nine::	27,431
Registration Number Ten::	37,234
Registration Number Eleven::	44,037
Registration Number Twelve::	43,235

**Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information**

Country:: Application number:: Filing Date::

**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

This sheet is not to be filed with the USPTO, but retained in the prosecution file as a record of the DOCSOpen number. Fields having no information may be deleted from the ADS. For example, if there is no foreign priority claim, the foreign priority text may be deleted from the ADS.

PA 3178624 v1